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12/27/2005

**TELCORDIA TECHNOLOGIES, INC.
ONE TELCORDIA DRIVE 5G116
PISCATAWAY, NJ 08854-4157**

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Vivian Austin	(Depositor's name)
<i>Vivian Austin</i>	(Signature)
January 9, 2006	(Date)

01/09/2006 HDEHES2 00000056 021822 09975890

01 FC:1501 1400.00 DA
02 FC:1504 300.00 DA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/975,890	10/12/2001	Prathima Agrawal	APP 1299-US	9688

TITLE OF INVENTION: NETWORK-LAYER AND LINK-LAYER USE OF SHADOW ADDRESSES WITH IP-BASED BASE STATIONS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	03/27/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
PARK, JUNG H	2661	370-331000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Joseph Giordano2 James W. Falk

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

TELCORDIA TECHNOLOGIES, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Piscataway, NJ

TOSHIBA AMERICA RESEARCH, INC.

Piscataway, NJ

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies _____

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 021822 (enclose an extra copy of this form).

5. Change in Entry Status (from status indicated above):

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

William A. Schoneman

Date

1/09/2006

Typed or printed name

William A. Schoneman

Registration No. 38047

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